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Pro Se 14 (Rev. 12/16) Complaint for Violation of Civil Rights (Prisoner)

# UNITED STATES DISTRICT COURT 17 OCT 23 PM 12: 58

District of

Division

Danell

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

Case No.

(to be filled in by the Clerk's Office)

JUDGE GWIN

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)

### COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Prisoner Complaint)

#### NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should not contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include only: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

#### The Parties to This Complaint I.

A.	The	Plain	tiff(	(2

B.

Provide the information below for needed.	or each plaintiff named in the complaint. Attach additional pages if
Name	Danell Hicks
All other names by which	•
you have been known:	
ID Number	03 09980
Current Institution	Cuyahiga County Jail
Address	P.O Box 5600
	cleveland OH 44(01
	City State Zip Code
The Defendant(s)	
the person's job or title (if known)	e contained in the above caption. For an individual defendant, include and check whether you are bringing this complaint against them in their pacity, or both. Attach additional pages if needed.
Name	Cleveland Police Department
Job or Title (if known)	Clereand total Dolar Mich
Shield Number	
Employer	
Address	
Address	
	City State Zip Code  Make Individual capacity Official capacity
Defendant No. 2	
Name	CALVIN WILLIAMS
Job or Title (if known)	ALE COL
Shield Number	Chief of fonce
Employer	
Address	
	City State Ziv Code

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C.

officials?

		Defendant No. 3  Name  Job or Title (if known)  Shield Number  Employer  Address	Cuyahoqa County Ctty Jail  P.O BOX 5600, 1215 WEST THIRD SIFEET  Cleveland OH 44113  City State Zip Code
		Defendant No. 4	☐ Individual capacity ☐ Official capacity
		Name	Cuyhoga County Jail
		Job or Title <i>(if known)</i> Shield Number	
		Employer	
	4, *	Address	P.O BOX 5600, 1215 WEST THIPD STREET
			cleveland OH 44113
			City State Zip Code  [X] Individual capacity X Official capacity
II.	Basis	s for Jurisdiction	
	immı <i>Fede</i>	unities secured by the Constitution and	e or local officials for the "deprivation of any rights, privileges, or d [federal laws]." Under <i>Bivens v. Six Unknown Named Agents of (1971)</i> , you may sue federal officials for the violation of certain
	Α.	Are you bringing suit against (check	c all that apply):
		Federal officials (a Bivens cla	im)
		State or local officials (a § 198	33 claim)
	B.	the Constitution and [federal laws].	g the "deprivation of any rights, privileges, or immunities secured by " 42 U.S.C. § 1983. If you are suing under section 1983, what ight(s) do you claim is/are being violated by state or local officials?
		I Amendment, IV An	hendment, y Amendment, and the VIII Amendment, XIV/hou

Plaintiffs suing under *Bivens* may only recover for the violation of certain constitutional rights. If you are suing under *Bivens*, what constitutional right(s) do you claim is/are being violated by federal

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and the second
#5. Marcus Harris
Director of Inmate Health Services
DI Individul Capacity ESI Official Capacity
#6. Director of the Cuyahoga County Correctional Center
1215 West Third Street
Cleveland OH 44113
M Individual Capacity & Official Capacity
(12-POLICE OFFICERS)
#7. Bussell D. Lyons - Es Individual Caracity Est Official Caracity
#8, JOSE, A. DELGADO JR - ET Individual Canacity EST Official Capacity
#79. MICHAEL B. BUDNY - DV Individual Capacity BS Official Capacity
#10 ARIEL ADJAS - ES Individual Capacity S Official Capacity
#11. MICHAEL T. GELSKE - OF Individual Caracity OF Official Camarity
#12. ANGEL SERRA - ES Individual Capacity So Official Capacity
#13. PATRICK M. LIVINGSTON - BS Individual Capacity BS Official Capacity
#14. DANNA SAFFO - EX Individual Coscary OSS Official Compacity
#15. JASON WARRINGTON-BY Ladvidual Carroty BY Official Capacity #16. RAMON J. KALOCZI JR BY Individual Capacity BY Official Capacity
Allo. RAMON J. KALUCZI JK RS Individual Copacity (S) Orticial Capacity
#17. ANDREW B. CRYTZER - 059 Individual Capacity BY Official Capacity
#18. JAMES P. TOOMEY JR 155 Individual Cosacity 150 Official Capacity
HIO DO ITAL CAT?
# 19. DR. ALAN GATZ. METRO HEAUTH SYSTEMS
DI Individual Copacity De Official Capacity
ES maniava corporary ES Difficial Capacity
HAO METRO HEALTH SYSTEMS
2500 METRO HEALTH DRIVE
CLEVELAND. OHIO - 44102
EST Official Capacity
HE MEDICAL DEPARTMENT COVAHOGA COUNTY COPRECTIONAL CENTER
1200 WEST THIED ST. CLEVELAND OHIO 44113
ES Individual Capacity & Official Capacity

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	D.	Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under <i>Bivens</i> , explain how each defendant acted under color of federal law. Attach additional pages if needed.
		(See Attachments A 1-5)
m.	Prise	oner Status
	Indic	ate whether you are a prisoner or other confined person as follows (check all that apply):  Pretrial detainee
		Civilly committed detainee
		Immigration detainee
		Convicted and sentenced state prisoner
		Convicted and sentenced federal prisoner
		Other (explain)
IV.	Stater	nent of Claim
	alleged further any ca	as briefly as possible the facts of your case. Describe how each defendant was personally involved in the discount with the dates and locations of all relevant events. You may wish to include details such as the names of other persons involved in the events giving rise to your claims. Do not cite ses or statutes. If more than one claim is asserted, number each claim and write a short and plain ent of each claim in a separate paragraph. Attach additional pages if needed.
	A.	If the events giving rise to your claim arose outside an institution, describe where and when they arose.
		(See Attachments A 1-3)
	В.	If the events giving rise to your claim arose in an institution, describe where and when they arose.
		(see Attachments AJ-5)

On Tuesday Febrary 28, 2017. I was parked on E. 23rd, Krause Ct. About two Minutes after I parked, My car was approached by two Males The one Male came to my driver side Window and immediately said "Get out the car. My first thought and response was for what? The male never identified himself as a police officer, nor did the male ask for identification, my driver license nor my car insurance. Being tired and under the influence I didn't know what to think, I Just came From picking my brother and his baby mother up from the. bar and was bringing them to their vehicle which was parked in front of my vehicle. I asked the man again for what reason would you need me to get out of my vehicle. As I was speaking to this Male, I then noticed multiple officers began to arrive with their guns drawn and aimed to be fired at my vehicle. With drugs going through my system I immediately became paranoid and feared that officers would shoot. I couldn't really understand what was going on nor Why. I was parked not breaking any laws, My tags and registration were legally valid and in good standing. I was not causing anytype of public disturbance nor harm to anyone. It was just four african american individuals in one vehicle and I Feel officers where racial profiling being they were not on a disturbance call, nor me ormy vehicle suspected in the commitance of any crime Im a citizen and it is my civil right and I am entitled to enjoy all rights, and protections, and is entitled to all its privileges and that includes the right to all citizens to be free to do as they please while respecting the rights of others, and freedom of association. There was no probable cause to even approach My Vehicle. Probable cause is a reasonable ground to suspect that

a person has committed or is committing a crime or that a place contains specific items connected with a crime, and probable cause amounts to more than a bare suspicion. Four african americans in a vehicle in a certain neighborhood, or going or coming from a restaraunt or bar is not suspicious but Racial Profiling. And the law-enforcement practice of using race, national origin, or ethnicity as a salient basis for suspicion of criminal activity is not probable cause. As a officer was removing the rear passengers of my vehicle My brother (Daron Hicks) and his baby Mother (Chauna cheers). another officer then opened fire and shot out my passenger window. confused and not knowing what else to do. I picked up my phone and called my mother. I informed her of the police having me surounded and shot out my window and I needed her there because I thought they were gonna Kill US. Once my mother arrived on the Ocene, I could hear her questioning and asking the officers what was going on with her boys, officers at that time had no Knowledge of the identitie of the driver and passenger in the front because they never asked. I heard my mother ask the officer's Where were her other son (Daron) and I could hear officers repeatedly lie and deny having custody of my brother. In my mind were so many crazy thoughts, Due to all the racial police Killings of young black males going on I thought officers harmed my brother in the worst way. I was confused and I was about to get out of rehicle. When several gun shots began to be fired at my Vehicle. My passenger Antonio Powell got out of the vehicle from the passenger side and I watched as the officers shot him down. It was devastating. Seeing my friend fall I Just Knew

that he was dead, all I Felt was pain shooting throughout my body all over. All I wanted was for everything to stop, the pain, the screams, the shooting, the pain was excruciating the officers fired repeatedly at my vehicle hitting me I've learned seveteen diffrent times with seventeen diffrent bullets. A few Minutes after the shooting stoped, I was paralyzed and in somuch pain, I watched as officers dragged my paralyzed body out of the passenger side of my vehicle and dragged me across the concrete to the rear end of the vehicle and hand cuffed me it was like looking at myself through someone elses eyes its hard to explain I watched as officers then unhandcuffed me and put me upon a stretcher then I passed out. After coming out of acoma. I learned I was in for approximately one week, I was discharged from Metro Hospital and transferred to Coyahoga County City Jail. Fresh out of acoma Still in exeruciating pain and was then discharged from Metro Hospital still made to Sleep on a concrete floor on a thin mattress for over 24 hours. I was in so much pain and was complaining when an officer informed me of what did I expect I was shot seven-teen different times, then the officer stated good thing I wasn't working because you would be clead, Go suck it up." I Couldn't believe it I feared for my life. I mean really terrified, I had pain in my lower spine, I could barely move, my left foot and Left elbow was scourching in shock spasms of Chronic pain. I had Stitches in my lower back, and a brace on my left foot in which I had no feelings in due to the nerve and muscle damage. I also had a cast on my left arm in which itself was causing excruciating pain all this bodily damage along

With the bullet wombs suffered from the shooting. I couldn't do nothing but cry and pray, the pain and suffering was so Unimaginable. After being arraigned in Cuyahoga County Court on March 17, 2017. I was then bonded over to the Cuyahoga County Jail, upon intake and admittance I spoke to a Dr. Alan Gatz, and he stated that He will not allow me to get the medication prescibed from hospital in the County Jall. and I asked why being I was in so much pain, The Brthen stated that they don't give them medication here and if I wanted special freatment I should not have came to Jail. I asked if the medications would be returned back to my mother being she purchased them from walqreens and he stated they should and yet my mother has not recieved medication or refund for puchase, Once finished speaking with Dr. Klan Cate going over my medical condition and attention needed. I was then placed on pod F on the 6th floor in a three man cell which is specifically used for innates in serious medical conditions, Yet inside of medical cell was a hospital bed in very poor conditioning. It caused my body ache and pain continually being metal springs where poking through mattress having me suffering tremendously. I reported problem of conditions immediately and all complaints were ignored. By the time medical department replaced the hospital bed, the cast on my left arm was being removed with scratching and ware from sleeping conditions of bed, and I was moved to a single man cell, where again I was given a thin mattress, thinner and in worser conclitioning than medical bed being there was less cusioning and I was made to sleep again on a cold concrete floor in complete knowledge of my critele medical conditions. From April to June, When I was moved

I never imagined being moved to a concrete floor it was hard, cold, and dusty, I went through tremendous pain each morning forcing myself up to eat breakfast, forcing myself up to take medication and forcing myself to go to medical treatments, getting up and down from off a concrete floor in the medical condition I was in was torchering and cruel punishment I feel when I was moved to a bottom bunk my bullet wombs were almost healed, everynight forcing myself up numerous times throughout the night to empty my colostomy bag. August, September and November come after my worst month of pain in october. I have been constantly requesting to nurse Lori True to speak with a Dr. Due to the pain in my lower back; I feel from getting upand down from off the floor for so Long. the metal plates and screws in my left elbow and left foot both continue to cause serious pain. I've had no nerve, nor pain medication in which was strong enough to mellow the pain at times its unbearable my left foot and leg damage is excruciating at times, from the nerve and Muscle injuries.

The police, medical department, nurses, as well as the Cuyahoga County Jall have all shown discrimination to the plaintiff, refusal and denial of proper care and medical attention criticle to me getting botter to even be able to walk normally again. The required treatment and care has worsened over thine plaintiff suffers internally, inflamation of muscles and scar tissue causing much fatique and deliriousness of strenvous vexation causing serere hindrance to my recovery the accumaltion of nerve damage and abuse of muscle erosions full effect may not be seen until my full recovery which may be three to four years fixom now.

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C. What date and approximate time did the events giving rise to your claim(s) occur?

(see Attachments A 1-5)

D. What are the facts underlying your claim(s)? (For example: What happened to you? Who did what? Was anyone else involved? Who else saw what happened?)

# ( see Attachments A 1-5

### V. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

# (See Atlachments A 1-5)

### VI. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

Plaintiff due to all the traums, pain, and suffering yet still to come and thus far is requesting \$1,000,000, one million dollars for each time I was shot thats a totall of \$17,000,000 Seventeen million manatary.

AND FOR PUNITIVE PANAGES FLAINTIFF REQUEST 480,000,000 THIRTY MILLION DOLLARS FOR A MOINATARY AND PUNITIVE YOTAL OF \$147,000,000 Forty Seven Million Dollars

### VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?
▼ Yes
⊠ No
If yes, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).
Cuyahoga County Jail and City Jail
Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure?
Yes Yes
□ No
Do not know
Does the grievance procedure at the jail, prison, or other correctional facility where your claim(s) arose cover some or all of your claims?
Yes
No No
☐ Do not know
If yes, which claim(s)?

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D.	Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose concerning the facts relating to this complaint?
	Yes
	□ No
	If no, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?
	Yes
	□ No
E.	If you did file a grievance:
	1. Where did you file the grievance?
	To the medical department and the Sheriffs Office
	and the Sheriff's Office
	2. What did you claim in your grievance?
	Medical neglection, pain from conditionings, and complaint of medication and treatm
	3. What was the result, if any?
	No Response
	4. What steps, if any, did you take to appeal that decision? Is the grievance process completed? If not, explain why not. (Describe all efforts to appeal to the highest level of the grievance process.)

I talked to nurses and staff and wrote grievance to sheriffs office with no results.

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	F.	If you did not file a grievance:  1. If there are any reasons why you did not file a grievance, state them here:
		2. If you did not file a grievance but you did inform officials of your claim, state who you informed, when and how, and their response, if any:
	G.	Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.
		They do as they please when they please I still have gotten no responses  (Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.)
m.	Previou	us Lawsuits
	the filing brough malicion	aree strikes rule" bars a prisoner from bringing a civil action or an appeal in federal court without paying a fee if that prisoner has "on three or more prior occasions, while incarcerated or detained in any facility, an action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, ous, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent of serious physical injury." 28 U.S.C. § 1915(g).
	To the	best of your knowledge, have you had a case dismissed based on this "three strikes rule"?
	☐ Ye	S
	No No	
	If yes, s	state which court dismissed your case, when this occurred, and attach a copy of the order if possible.

A.		ave you filed other lawsuits in state or federal court dealing with the same facts involved in this tion?
		Yes
	Þ	( No
В.	If ;	your answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is one than one lawsuit, describe the additional lawsuits on another page, using the same format.)
	1.	Parties to the previous lawsuit Plaintiff(s)  Defendant(s)
	2.	Court (if federal court, name the district; if state court, name the county and State)
•	3.	Docket or index number
	4.	Name of Judge assigned to your case
	5.	Approximate date of filing lawsuit
	6.	Is the case still pending?
-	••	Yes
		No
		If no, give the approximate date of disposition.
	7.	What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)
C.	Hav	ve you filed other lawsuits in state or federal cour otherwise relating to the conditions of your
	imp	orisonment?

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		] Yes
	×	Í No
		NIX
D.		your answer to C is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is than one lawsuit, describe the additional lawsuits on another page, using the same format.)
	1.	Parties to the previous lawsuit
		Plaintiff(s)
		Defendant(s)
	2.	Court (if federal court, name the district; if state court, name the county and State)
	3.	Docket or index number
	4.	Name of Judge assigned to your case
-	5.	Approximate date of filing lawsuit
	6.	Is the case still pending?
		Yes
		□No
		If no, give the approximate date of disposition
	7.	What was the result of the case? (For example: Was the case dismissed? Was judgment entere in your favor? Was the case appealed?)
		<b>\</b> \/

### IX. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

### A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case—related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

CLEVELAND City State Zip C  For Attorneys  Date of signing:  Signature of Attorney Printed Name of Attorney Bar Number Name of Law Firm Address	Date of signing:  Signature of Plaintiff Printed Name of Plaintiff Prison Identification # Prison Address	Danell Lee Hicks Danell Hicks 0309980 CUVAHOGA COUNTY SHIP	ANALOS WYST	500
. For Attorneys  Date of signing:  Signature of Attorney Printed Name of Attorney Bar Number Name of Law Firm Address  City State Zip Co			6H	44113
Date of signing:  Signature of Attorney Printed Name of Attorney Bar Number Name of Law Firm Address  City State Zip Co		City	State	Zip Code
Signature of Attorney Printed Name of Attorney Bar Number Name of Law Firm Address  City State Zip Co	For Attorneys			
Printed Name of Attorney  Bar Number  Name of Law Firm  Address  City State Zip Co	Date of signing:			
Bar Number  Name of Law Firm  Address  City State Zip Co	Signature of Attorney			
Name of Law Firm  Address  City State Zip Co	Printed Name of Attorney	/	Wind &	
Address  City State Zip Co Telephone Number	Bar Number			
City State Zip Co	Name of Law Firm			
Telephone Number	Address			
		City	State	Zip Code
E-mail Address	Telephone Number			
	E-mail Address			